

POSITION DESCRIPTION (Please Read Instructions on the back)										1. Agency Position No 00CX835							
Cybersecurity Designation 000 - Not Applicable																	
Drug Test Required		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Capstone Official		<input type="checkbox"/> Yes <input type="checkbox"/> No		Occupational Category Code									
2. Reason for Submission			3. Service		4. Employing Office Location			5. Duty Station		6. Full Performance Level							
<input type="checkbox"/> Redescription <input type="checkbox"/> New			<input checked="" type="checkbox"/> Central Office <input type="checkbox"/> Region		17514 Washington District of Columbia			Washington, DC		GS-14							
<input type="checkbox"/> Reestablishment <input checked="" type="checkbox"/> Other			Explanation (Show any positions replaced) Cover sheet is re-created in support of the PD migration effort.			7. Fair Labor Standards Act		8. Financial Statements Required		9. Subject to IA Action							
						<input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Nonexempt		<input checked="" type="checkbox"/> N/A <input type="checkbox"/> OGE 278 <input type="checkbox"/> OGE 450		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
						10. Position Status		11. Position is		12. Sensitivity		13. Competitive Level Code					
			<input type="checkbox"/> Excepted (Specify in Remarks)		<input type="checkbox"/> Supervisory or Manager (2) <input type="checkbox"/> Management Official CSRA (5) <input type="checkbox"/> Team Leader (7)		<input checked="" type="checkbox"/> Competitive <input type="checkbox"/> SES (Gen.) <input type="checkbox"/> SES (CR)		<input type="checkbox"/> Supervisory or CSRA (4) <input type="checkbox"/> Leader (6) <input checked="" type="checkbox"/> Non-Supervisory (8)		25. Position Sensitivity and Risk						
									5 - Moderate Risk (MR)		26. Security Clearance						
											0 - Not Required						
15. Classified/Graded by		Official Title of Position				Pay Plan		Occupational Code		Grade		Initials		Date			
a. Office of Personnel Management																	
b. Department, Agency or Establishment		Program Analyst				GS		0343		14		nf		06/02/2016			
c. Second Level Review																	
d. First Level Review																	
e. Recommended by Supervisor or Initiating Office																	
16. Organizational Title of Position (if different from official title)						17. Name of Employee (if vacant, specify)											
18. Department, Agency or Establishment						c. Third Subdivision											
General Services Administration																	
a. First Subdivision						d. Fourth Subdivision											
Federal Acquisition Service																	
b. Second Subdivision						e. Fifth Subdivision											
Central Office																	
19. Employee Review- This is an accurate description of the major duties and responsibilities of my position.						Signature of Employee (optional)											
20. Supervisory Certification.																	
I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the knowledge that this information is to be used for statutory purposes relating to appointment and payment of public funds, and that false or misleading statements may constitute violations of such statutes or their implementing regulations.																	
a. Typed Name and Title of Immediate Supervisor						b. Typed Name and Title of Higher-Level Supervisor or Manager (optional)											
Supervisor Approver						N/A											
Signature				Date		Signature				Date							
Supervisor Approver /s/				04/23/2018													
21. Classification/Job Grading Certification						22. Position Classification Standards Used in Classifying/Grading Position											
I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards.						Administrative Analysis Grade Evaluation Guide, TS – 98 August 1990 Management and Program Analysis Series, 343, TS – 98 August 1990 Classified By Nate Floyd, 6/2/2016											
Typed Name and Title of Official Taking Action						Information for Employees											
Karen Sklencar						The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management.											
Signature				Date													
Karen Sklencar /s/				04/23/2018													
23. Position Review		Initials		Date		Initials		Date		Initials		Date		Initials		Date	
a. Employee (Optional)																	
b. Supervisor		kms		04/23/2018													
c. Classifier		kms		04/23/2018		kms		04/23/2018									
24. Remarks																	
Cover sheet (i.e., OF-8) re-created by Karen M. Sklencar, HR Specialist, on April 23, 2018 in support of the PD migration effort. Original cover sheet was classified by Nate Floyd on 6/2/2016 and certified by Frank Tiller on 6/3/2016.																	